PTO/SB/22 (10-00)

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## PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Docket Number (Optional) 016807-002400ÙS

				BSI Rel. No. 02-001	
TRACE LIBER	In re Application of ROBERT S. BEHL et al.				
		Application Number 09/663,048 Filed September 15, 2000			2000
		For METHODS A TISSUE ABL		FOR FOCUSED BIPOLA	R
		Group Art Unit 3739	Examiner KEARNEY, R.		
	This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.  The requested extension and appropriate non-small-entity fee are as follows (check time period desired):  One month (37 CFR 1.17(a)(1))  Two months (37 CFR 1.17(a)(2))  Three months (37 CFR 1.17(a)(3))  Four months (37 CFR 1.17(a)(4))  Four months (37 CFR 1.17(a)(4))				
	☐ Two months (37 CFI	R 1.17(a)(2))		\$	N
	☐ Three months (37 CFR 1.17(a)(3))			\$	
	☐ Four months (37 CF	R 1.17(a)(4))		\$	
	☐ Five months (37 CF	R 1.17(a)(5))		\$	
-	above is reduced by one-half, and the resulting fee is: \$  A check in the amount of the fee is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Commissioner has already been authorized to charge fees in this application to a Deposit Account.  The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 20-1430.  I have enclosed a duplicate copy of this sheet.  I am the applicant/inventor.  assignee of record of the entire interest. See 37 CFR 3.71  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  attorney or agent of record.  attorney or agent under 37 CFR 1.34(a).  Registration number if acting under 37 CFR 1.34(a).				
-	WARNING: Information on this to be included on this form. Provided	orm may become pu de credit card inforn	ublic. Credit ca nation and auth	rd information should porization on PTO-2038.	not
	February 12, 2003				
	Date			Signature	
)2/24/2003 CNGUYI	N 00000071 201430 09663048		James	M. Heslin, Reg. No. 29,	,541
)1 FC:1251	110.00 CH		1	Typed or printed name	,
	NOTE: Signatures of all the inventors or assigned forms if more than one signature is required, see	es of record of the entire inte below*.	rest or their represer	ntative(s) are required. Submit	multiple
	*Total of forms are submitted.				

Burden Hour Statement: This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231. PA 3283328 v1